



California State Lands Commission
Marine Invasive Species Program
Ballast Water Treatment Technology Annual Reporting Form
 Public Resources Code Section 71205(g)
 July 1, 2010

Vessel Name:
Official / IMO Number:
Responsible Person's Name and Title:
Date Submitted (DD/MM/YYYY):

Treatment System Information

1. List the treatment system installed on board the vessel:

Manufacturer/Company: _____

Product Name: _____

Model Number: _____

1a. Mode(s) of Action (check all that apply):

Filtration <input type="checkbox"/>	Cavitation <input type="checkbox"/>	Hydrocyclone <input type="checkbox"/>	Deoxygenation <input type="checkbox"/>
Active Substance/Biocide <input type="checkbox"/>	Ultra Violet Irradiation <input type="checkbox"/>	Heat <input type="checkbox"/>	
Other <input type="checkbox"/> , please describe:			

1b. List all substances (i.e. chemicals, biocides, flocculants, neutralization agents) created or used by the treatment system (if any), and indicate whether or not the Material Safety Data Sheet is kept on board for each substance.

Substance	MSDS on Board?
	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
N/A <input type="checkbox"/> , No substances used by system.	

Official/IMO Number: _____

1c. Are manufacturer's technical guides, publications and/or manuals for the treatment system kept on board? Yes ☐ No ☐

2. When did the system installation receive classification society approval?

Date (DD/MM/YYYY): _____

3. Did the system installation occur (check all that apply):

As part of a scheduled out of water dry docking? Yes ☐ No ☐

During a special/non-routine out of water dry docking? Yes ☐ No ☐

Without the need for out of water dry docking? Yes ☐ No ☐

4. Has there been any significant upgrade/modification to the system since classification society approval? (Do not include repairs. See instructions for more information and definition of significant.)

Yes <input type="checkbox"/>	Date of Upgrade (DD/MM/YYYY):
Describe upgrade:	
No <input type="checkbox"/>	

5. Has any unscheduled or emergency maintenance been performed on the system since classification society approval (or since the previously submitted Ballast Water Treatment Technology Annual Reporting Form)?

Yes <input type="checkbox"/>	Date of Most Recent Event (DD/MM/YYYY):
Describe most recent maintenance event:	
No <input type="checkbox"/>	

6. Is the vessel in compliance with the requirement to maintain a ballast water treatment performance log on board? (This log may be incorporated into the existing ballast water management log. See form instructions for minimum requirements). Yes ☐ No ☐

7. Is system performance (i.e. biological efficacy) verified on a regular basis? Verification is not a requirement by the State of California, however, regular performance testing will allow the vessel to ensure the system is working properly.

Yes <input type="checkbox"/>				
How often:	Weekly <input type="checkbox"/>	Monthly <input type="checkbox"/>	Yearly <input type="checkbox"/>	Every 2 years <input type="checkbox"/>
	Other <input type="checkbox"/> , describe:			
No <input type="checkbox"/>				

**California State Lands Commission
Marine Invasive Species Program
Ballast Water Treatment Technology Annual Reporting Form
Public Resources Code Section 71205(g)
July 1, 2010
Instructions for Completing Annual Reporting Form**

**BALLAST WATER TREATMENT TECHNOLOGY ANNUAL REPORTING FORM
TO BE SUBMITTED ANNUALLY BY VESSELS THAT HAVE A BALLAST WATER
TREATMENT SYSTEM INSTALLED ON BOARD, AND HAVE OR WILL BE
DISCHARGING TREATED BALLAST IN WATERS OF THE STATE**

**FORM MUST BE SUBMITTED within 60 days of receiving a written or electronic
request from the Commission**

SUBMIT THE COMPLETED FORM TO:

California State Lands Commission
Marine Facilities Division
200 Oceangate, Suite 900
Long Beach, CA 90802
FAX: 562-499-6444
Email: bwform@slc.ca.gov

Treatment System Information

Question 1: Provide the requested information for each ballast water treatment installed on the vessel. **NOTE:** If more than one treatment system is installed on board the vessel, the form must be filled out separately for each system.

- List the system manufacturer or company (For example - Acme Incorporated).
- List the product name, if applicable (For example - Acme Ballast Water Treatment System).
- List the model number, if applicable (For example - Acme Model # 5454). Do not provide the serial number.
- **Question 1a.** Check ALL appropriate boxes that describe the mode(s) of action that the system uses to treat ballast water. For example, if the system first filters the water and then uses ultraviolet radiation, check both “filtration” and “ultraviolet irradiation.” If the system uses a mode of action not described, check “Other” and then describe the mode of action.
- **Question 1b.** If applicable, please provide the name(s) of all substances (chemicals or biocides that kill or inactivate organisms in ballast water, flocculating agents, and/or neutralizing agents) manufactured by or associated with the use of the ballast water treatment system (e.g. hypochlorite, sodium bisulfate...). If no substances are used by the system, check “N/A” and move to Question 1c. Some systems may use multiple substances. Please list all of them.

Refer to the Material Safety Data Sheets (MSDS) as necessary to answer this question. Additionally, indicate whether or not the MSDS is kept on board for each substance, if applicable.

- **Question 1c.** Check the appropriate box to indicate if the vessel maintains the ballast water treatment system manufacturer's technical guides, publications and/or manuals on board.

Question 2: Indicate the date (DD/MM/YYYY) when the ballast water treatment system installation received classification society approval for operation on the vessel.

Question 3: Please mark "yes" or "no" for each of the following:

- Was the ballast water treatment system installed during the regularly scheduled out of water dry docking of the vessel (For example - in conjunction with a dry docking scheduled for a classification society inspection or hull maintenance/repair)?
- Did the vessel require a special (non-routine) out of water dry docking that was scheduled exclusively for the installation of the ballast water treatment system?
- Was the ballast water treatment system installed without the need for out of water dry docking (For example - while the vessel was still in the water or while underway)?

Question 4: Since receiving classification society approval, has the ballast water treatment system been "significantly" modified or upgraded. For the purposes of this question, "significant" means a modification to the system:

- Which changes its volumetric capacity to treat ballast water by 15 percent or greater; or
- Which changes the mode of action of the treatment system; or
- Which is projected to prolong the life of the ballast water treatment system by 10 years or more; or
- Which results in a modification to the ballast water treatment system other than component replacement-in-kind.

If the answer is "Yes" to ANY of the bullets above, then check "Yes" and fill in information for date of upgrade and generally describe the nature and extent of the update/modification to the ballast water treatment system. (For example - Filtration unit was enlarged to handle 20% more capacity of incoming ballast water).

If the answer is "No" to ALL of the bullets above, check "No" and proceed to Question 5.

Question 5: Check the appropriate box to indicate whether or not the system has undergone any unscheduled or emergency maintenance since the system was commissioned.

- If "Yes" was selected, describe the most recent emergency or unscheduled maintenance event. What type of malfunction occurred? How was it addressed? Provide the date (or dates) of when this event occurred.
- If "No" was selected, proceed to Question 6.

Question 6: Check the appropriate box to indicate whether the vessel is in compliance with the requirement to maintain a ballast water treatment performance log on board. The ballast water treatment performance log may be maintained as part of the ballast water management log or as an independent document.

At a minimum, the ballast water treatment performance log must include:

- The dates, times, and locations of the starting and stopping of the system for the purpose of treating ballast water.
- Dates, time and descriptions of any system malfunctions, including problem resolution.
- Dates, times and locations of both scheduled and unscheduled maintenance of the system.
- All relevant measures of system performance recorded during system operation. For example - UV transmittance, residual chemical concentration.

Question 7: Check the appropriate box to indicate whether system performance (i.e. biological efficacy) is verified (either by the vessel, the system manufacturer or a third party organization) on a regular basis. The State of California does not require vessels to conduct system performance verification, however, regular performance testing will allow the vessel to ensure the system is working properly.

- If “Yes” was selected, check the appropriate box to indicate the frequency with which the performance/efficacy of the ballast water treatment system is verified. If the system is verified on a different schedule, check “Other” and describe that schedule.
- If system performance verification is not conducted, select “No.”